

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>FM</i>	10594	3/21
O.I.P.E. CLASSIFIER	<i>SB</i>	10	3-23-99
FORMALITY REVIEW		#07033	4-2-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	9	
2	✓	10	
3	✓	11	
4	✓	12	
5	✓	13	
6	✓	14	
7	✓	15	
8	✓	16	
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36	✓	44	
37	✓	45	
38	✓	46	
39	✓	47	
40	✓	48	
41	✓	49	
42	✓	50	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(1 FET INSIDE)

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